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Re Applic of	Philip L. Campbell, et al.
Docket No.	FIS920040120US1
Serial No.	10/709,351
Filing Date	April 29, 2004
Attorney	Kerry Goodwin

Document(s) Attached: Amendment Transmittal letter, Amendment and Authorization to Act  
in a Representative Capacity

## PLEASE DELIVER TO:

EXAMINER: Yonel Beaulieu

ART UNIT: 3661

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<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>					Docket No. <b>FIS920040120US1</b>	
Applicant(s): <b>Philip L. Campbell, et al.</b>						
Application No. <b>10/709,351</b>	Filing Date <b>April 29, 2004</b>	Examiner <b>Yonel Beaulieu</b>	Customer No. <b>32,074</b>	Group Art Unit <b>3661</b>	Confirmation No. <b>3350</b>	
Invention: <b>AUTOMATION SYSTEM USING WIRELESS HIGH FREQUENCY</b>						
<b>COMMISSIONER FOR PATENTS:</b>						
Transmitted herewith is an amendment in the above-identified application.						
The fee has been calculated and is transmitted as shown below.						
<b>CLAIMS AS AMENDED</b>						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
<b>TOTAL CLAIMS</b>	<b>20 -</b>	<b>20 =</b>	<b>0</b>	x <b>\$50.00</b>	<b>\$0.00</b>	
<b>INDEP. CLAIMS</b>	<b>3 -</b>	<b>3 =</b>	<b>0</b>	x <b>\$200.00</b>	<b>\$0.00</b>	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					<b>\$0.00</b>	
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account <b>09-0458</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.						
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>						
 <div style="text-align: center;">Signature</div>						
<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <b>Kerry Goodwin</b>            Reg. No.: 48,955            Telephone No.: 845-892-9645         </div> <div style="width: 55%;">           Dated: <b>April 28, 2006</b> </div> </div>						
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PTO/SB/84 (01-06)

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**AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY**In re Application of: **Philip L. Campbell, et al.**

Application No.

**10/709,351**

Filed:

**April 29, 2004**Title: **AUTOMATION SYSTEM USING WIRELESS HIGH FREQUENCY**

Attorney Docket No.

**FIS920040120US1**

Art Unit:

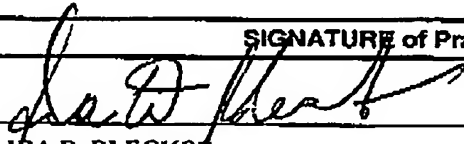
**3661**

The practitioner named below is authorized to conduct interviews and has the authority to bind the principal concerned. Furthermore, the practitioner is authorized to file correspondence in the above-identified application pursuant to 37 CFR 1.34:

Name	Registration Number
<b>KERRY GOODWIN</b>	<b>48,955</b>

**This is not a Power of Attorney to the above-named practitioner.** Accordingly, the practitioner named above does not have authority to sign a request to change the correspondence address, a request for an express abandonment, a disclaimer, a power of attorney, or other document requiring the signature of the applicant, assignee of the entire interest or an attorney of record. If appropriate, a separate Power of Attorney to the above-named practitioner should be executed and filed in the United States Patent and Trademark Office.

**SIGNATURE of Practitioner of Record**

Signature		Date	<b>April 28, 2006</b>
Name	<b>IRA D. BLECKER</b>	Registration No., if applicable	<b>29,894</b>
Telephone	<b>845-892-9645</b>		

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